O.O. . Stell Sin Transmissis Office, U.S. DEPARTMENT OF COMME Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control nu

_	Substitute for Form PTO-875						Application or Docket Number 10601432			
	CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY		OR	OTHE	ER THAI L ENTIT
	FOR	NUM	IBER FILE	D NÚM	BER EXTRA	RATE	FEE		RATE	
	SIC FEE CFR 1.16(a))					T TVILL	s	OR	KATE	F
	TAL CLAIMS CFR 1.16(c))		minus	20 = '		× \$	=	OR	X \$ =	\\ \frac{1}{5}
	CFR 1.16(b))	AIMS	minus	3 = .		x \$		OR	x \$ =	†
MU	LTIPLE DEPEND	ENT CLAIM PRESI	ENT	(37 CFR 1.16(d))		+ 5		OR	+ 5 =	╁──
• 11	V a	column 1 is less the			1 2.	TOTAL		OR	TOTAL	
	. ,	(Column 1)	MENDE	O – PART II	(Column 3)	SMAL	L ÉNTITY	OR		R THAN . ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADI TION FE
DME	Total (37 CFR 1.16(c))	23	Minus	23	-	X \$=		OR	x \$=	
1EN	Independent (37 CFR 1.16(b))	' /	Minus	3		=		OR	x \$=	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$=		OR	+ \$ =		
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)					
MENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	·	RATE	AD(TION FE
	Total (37 CFR 1.16(c))	•	Minus	••	E	x \$ · =		OR	x \$ =	
AMEND	Independent (37 CFR 1.16(b))	•	Minus	•••	=	X \$ =		OR	x \$ =	
₹	FIRST PRESENT	FATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CF	R 1.16(d))	+ \$ =		OR	+ \$ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)					
MENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADC TION FEI
₩ [Total	•	Minus	4.			T	1		

OME	Total (37 CFR 1.16(c))	•	Minus	••	=			
EN	Independent (37 CFR 1.16(b))	•	Minus	•••	=			
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							

RATE	ADDI- TIONAL FEE		RATE
X \$ =		OR	x \$=
X \$ =		OR	× \$ =
+ \$ =		OR	+ \$=
TOTAL ADD'L FEE		QR	TOTAL ADD'L FEE

• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.